Substitute fo	rm 1449/F	OTO								
Substitute form 1449/PTO							Complete if Known			
							Application Number	UNKNOW	UNKNOWN	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT						Filing Date	HEREWIT	HEREWITH		
STATEMENT BY APPLICANT							First Named Inventor	PETER GROZ		
							Group Art Unit	UNKNOW	UNKNOWN	
							Examiner Name	NOT YET ASSIGNED		
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